



Chair Pendergrass and members of the House Health and Government Operations Committee,

The Association of Independent Midwives of Maryland (AIMM) would like to express their full support of House Bill 66. Our organization believes that LDEMs are appropriately trained to provide competent care and risk screening for a low risk population, including vaginal birth after cesarean (VBAC) as defined in HB66. Additionally, we acknowledge the clear need for this care in a culture which lends limited options for safe and accessible care to clients seeking VBAC.

Since licensure, LDEMs have established themselves as valuable providers in our community, offering services that cannot be matched by the care provided in the hospital system. Over the past several years, LDEMs have been subject to annual reporting with the board of nursing, providing further evidence of their capabilities. LDEMs have developed close relationships with local hospitals, Certified Nurse Midwives, Maternal Fetal Medicine practitioners, and other members of the healthcare team in an effort to collaborate and provide the best care for clients seeking out-of-hospital birth options.

Maryland families deserve the opportunity to make informed choices regarding their birth plans with the guidance of the healthcare provider of their choosing. LDEMs are licensed practitioners, complete with clearly defined regulations, informed consent documents, and established transfer policies. This small change to the current regulations can make a big impact in our community. Currently midwives are turning away anywhere from 1 to 5 inquiries for VBAC each month. Our hope is that HB66 will provide more options for families seeking VBAC, along with higher VBAC success rates, lower cesarean rates, and overall improved satisfaction surrounding the birth process.

Thank you for your time and consideration,

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